

steroids. To date it has not been possible to determine the overall period of time necessary for patients to remain on steroid maintenance doses. As yet the effect of steroids on the disease process remains unknown.

Because of the potentially dangerous side effects resulting from long-term high doses of corticosteroids, this mode of therapy should be used only when the classical treatment with anticholinesterase agents or thymectomy or both have failed to control the symptoms of the disease.

N. VIJAYAN, MD  
P. M. DREYFUS, MD

#### REFERENCES

- Warmolts JR, Engel WK: Benefit from alternate day prednisone in myasthenia gravis. *N Engl J Med* 286:17-20, Jan 1972  
Seybold ME, Drachman DB: Gradually increasing doses of prednisone in myasthenia gravis reducing the hazards of treatment. *N Engl J Med* 290:81-84, Jan 1974

### Dantrolene Sodium (Dantrium®-Eaton) for Relief of Spasticity

WITHIN THE last three years, extensive evaluation of dantrolene sodium (Dantrium®), a unique chemical agent for relief of severe spasticity, has been done. This medication appears to act directly on the contractile mechanism of skeletal muscle rather than as a central suppressant of spinal cord or higher brain stem reflexes concerned with the spastic state. It is believed that the drug interferes with the release of calcium from the sarcoplasm and thus interferes in the excitation-contraction sequence of muscle. Results of experimental studies have shown diminution of the Achilles reflex and resting tone; while in some reports, volitional contraction of the muscle as measured by transducers or as monitored by electromyography was little affected. The drug offers the potential of decreasing spasms in patients with cerebral palsy, spinal injuries or multiple sclerosis. Findings of recent clinical studies indicate an approximate 50 percent improvement in most patient groups, although with considerable variability from one report to the next.

Side effects include pronounced diarrhea, occasional vertigo and rare hepatic dysfunction. General malaise, light-headedness and some confusion also may occur. Many patients have as a side effect such increased weakness that use of the drug must be discontinued. The drug's effect usually is short-lived and the dose must be in-

creased gradually from 25 mg twice a day to as much as 100 mg four times a day. The drug apparently is not effective for painful muscular contraction in various rheumatic states.

It appears that the dantrolene sodium may be worth trying in patients whose progress in recovery from illnesses with spasticity has not been complete, but at the risk of inducing some simultaneous decrease in motor strength. Landau has recently attacked the theoretical concepts in the use of such agents since he believes that suppression of motor unit activity in symptomatic hyperactive reflexes usually would have to interfere with purposeful movement as well. He points out that previous trials of curare for the relief of reflex spasm are effective but exaggerate weakness.

Despite the theoretical controversies about the new drug, it deserves further study. The dose must be carefully determined for each patient and further data concerning long-term toxicity are needed before its proper place in the armamentarium of relaxant drugs is assigned.

JAMES R. NELSON, MD

#### REFERENCES

- Chyatte SB, Basmajian L: Dantrolene sodium's long-term effects and severe spasticity. *Arch Phys Med Rehabil* 54:311-315, Jul 1973  
Chyatte SB: Dantrolene sodium and athetoid cerebral palsy. *Arch Phys Med Rehabil* 54:365-368, Aug 1973

### Brain-stem Audiometry

IT IS NOW possible to record in humans the electrical activity generated along the auditory pathway in its course from the cochlea to the cortex using surface electrodes (Jewett). The principle employed is that of "far-field" recording and entails using a small computer to average the potentials generated—at a distance out of the background electrical noise. Approximately 1,000 to 2,000 click trials presented at 10 per second are necessary to resolve the brain-stem components.

With this technique, it is possible to define a series of seven deflections in the first ten milliseconds following click signals. Their amplitudes are in the nanovolt range. Both the latency and amplitude of the components vary in an orderly manner with signal intensity and can be detected to click signals close to threshold intensity. The generators of these potentials have been shown by experiments in animals (Jewett) and in humans (Starr and Achor) to originate in particular areas of the auditory pathway. For instance, Wave 1,